Reviewer's report

Title: Does Accreditation Stimulate Change? A Study of the Context and the Impact of the Accreditation Process on Canadian Healthcare Organizations

Version: 1 Date: 12 May 2009

Reviewer: David Greenfield

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Does accreditation stimulate change? Review

Major compulsory revisions

The paper is positioned to discuss how accreditation helps induce organisational changes that enhance quality and safety of care. However the paper is sparse on discussing the literature about these issues and needs improving in this area. The paper is not sufficiently grounded in the accreditation literature. There is a need to further develop the beginnings made and highlight the importance of the questions studied. As phrased the questions being studied seen to reflect the very changes the accreditation standards require? Hence the authors need to explain what is significant about them? As the paper stands the questions outlined initially (P5 PG1) do not match the questions in the discussion (P14-15). That is, having participants discuss the organisational changes attributed to the “turbulent environment of Canada’s healthcare system in recent years” is introduced for the first time in the discussion.

The paper only makes passing reference to concepts and issues about organisational change. The “concepts of context and organisational change” and the analytical framework (P7 PG2) drawn on for the paper need to be detailed and explained, if not in the introduction, then earlier in the paper. Clarifying how the “analytical framework” is equivalent to a “model of change” (figure 1) is necessary. As part of this explanation, how the parts of the figure/ framework integrate or fit together is not clear. That they are drawn from a previous paper adds weight to their credibility. However they need to be explained in more detail in this paper for the reader to understand and interpret the findings of this study. Additionally, as it is, the study is focused on the accreditation system in Canada. This gives the paper an individual country focus. For readers beyond Canada interest in the paper could be limited. By having a more detailed discussion of the issues associated with the accreditation of healthcare organisations (HCO) and related issues of organisational change the paper would have greater relevance to an international audience. Furthermore, by addressing these two issues the paper can make a more detailed and stronger discussion about the link between organisational change and quality of care. With such a beginning the paper can then explain in the method section that it draws upon empirical data from a study within Canada; then it would be appropriate to integrate the third paragraph in the introduction in the “study design and method” section.
There is insufficient explanation of the study design and method. The reason for the use of the case selection criteria (P5 PG3) is not explained adequately nor grounded in literature to be convincing. A stronger argument referenced with evidence is required. It is not explained why “location” needs to be controlled for “cultural diversity”. This may be self evident to a Canadian reader however to readers from other countries it is likely to remain a mystery. The claim that the study has “representativity” by the five cases is not well explained. Additionally, it is not clear that the five cases being compared are equivalent to each other and can be collated together as they have been. The paper makes the distinction that they are different organisations (P5 P3 L 11-12), however is it correct to call a regional health authority a HCO? Characteristics about the cases are presented in a table – Table 1; however the table is not integrated into the text but simply referred to in passing. An explanation of each organisation and how they are the same/different needs to be made so that the reader can decide how the findings and implications can be translated to their particular contexts. The text says that there are different accreditation statuses (P5 P3 L13; P14 P5) for the cases. The paper appears to be defining different accreditation “status” to be correlated to the length of time since accredited; this is unusual and needs explanation if it is to be accepted. Further details about the method used (P6 PG 2) in the study are necessary. The first line makes no mention of the focus groups and then in the paragraph, the text describes interviews to include “25 interviews and 10 focus groups”. Are the interviews and focus groups the same? There is insufficient information about the type of interviews and focus groups conducted - Were they structured or semi-structured? Where did the questions come from? How was consistency achieved from interview to interview? Was the same format and questions used in the interviews and groups? Additionally, the text does not state the total number of participants in the study.

The findings section is not well constructed and does not support the conclusion and recommendations that follows. The reason for using the three phases of the accreditation process to present the findings is not explained. Similarly, the reason for putting to one side the theoretical framework used to analyse the data, as noted in the data analysis section (P7 PG 2), is not explained. Why was the former substituted for the later? The findings tables (P7-8) are not adequately linked to the text. They are referred to in passing but not discussed in a way that makes clear what they are presenting and its significance. Additionally, the headings for the tables do not integrate well with the text. In particular, table 3 is referred to in two places, page 7 and 8, in two different ways. The two explanations do not appear consistent with each other. There are assumptive statements made in the findings, (for example P12 PG 2 L6; P13 PG 1 L10) that are not supported by the evidence provided. Such statements continue into the discussion section, where the argument is insufficiently developed to support the claims made. For example, there is insufficient evidence and argument to support the claim that the study demonstrates that accreditation has a role in the creation of social capital (not defined nor explained in the paper?), impacts mergers and the learning curve associated with accreditation. The recommendations that conclude the paper are not supported by the findings and
discussion. For example, it is not clear why the disengagement of physicians is the responsibility of policy makers to address – this statement is does not follow from any discussion within the paper.

The referencing in the text does not comply with the journals requirements. Furthermore, the references at the end of the paper are not consistent and do not comply with the journals requirements.

Minor essential revisions

In addition to the major issues discussed there are a number of minor formatting errors that have been overlooked when editing. The following is a non-exhaustive list of such errors:

P4 PG 2 L1: full stop out of place.
P5 PG2 L3: the Langley reference has been repeated.
P5 PG3 L7; there is a space before the word Saskatchewan.
P5 PG3 L3: the format for such sentences is inconsistent; replacing the “,” with “;” would make the sentence read better.
P6 PG3 the second sentence in the paragraph is too long and difficult to follow. An appropriate place to break the sentence appears to be after the reference “[20]”. The next sentence could then read, “The use of multiple….”
P6 PG3 L12 the abbreviation “FG”, if necessary, should be placed where the words focus group appears, which at present is on line 7 of this paragraph.
P7 PG3 L2 the Miles and Huberman (1994) reference is not included in the reference list.
P6-7 The listing of the departments from which focus group representatives were drawn seems excessive. The list could be replaced with a simple phrase such as “of representative from departments across the HCO.”
P7 PG 5 The table is identified as “Table 3” but it is only the second table mentioned in the text. Headings do not integrate well with the text.

Furthermore, there are a number of places where sharpening the phrasing could improve the paper. Again, the following is a non-exhaustive list of areas where improvements could be made:

P5 PG1 L4: “Our main research questions were…” this raised the question that there were other research questions that are not mentioned. Omitting the word “main” or alternatively listing all the research questions, would resolve this issue.
P7 PG3 “The research team was staff by professionals from a variety of background such as…” the sentence would be stronger if the actual backgrounds were listed or the words “such as” could be replaced with “which were”.
The headings on the three tables are all different from each other. Standardising their format is required.
P8 PG 2 L3 “The new RHA mainly used accreditation to integrate the pre-existing entities into the new entity.” This could be improved by rephrasing as the
repetitive use of new and entities is not necessary. For example, “The RHA mainly used accreditation to integrate the existing organisations together.”

P8 PG 2 L4 The idea that a “… self-assessment phase served to create a venue… ” is not logical. This requires rephrasing.

The continued use of the word “also” through the text is not necessary. Its removal, from many instances, would improve the reading of the paper.

Level of interest: An article of limited interest

Quality of written English: Not suitable for publication unless extensively edited

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:

I declare that I have no competing interests